

Work Order ID 91598

91598

Page 1

October-17-12 9:50:45 AM

Item ID: D3901-3 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Bar
 Start Date: 10/17/12 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 10/26/12 Req'd Qty: 8.00 ***8*** Customer:

Reference:

Approvals: Process Plan: *[Signature]* Date: *12-10-12* Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3901	E								

100 0.00
100
 Cold Saw Memo
 Hyd Mech Cut blanks at 67.50"
OK 12/11/02 8 0

110 0.00
110
 HAAS 1 Memo
 HAAS CNC vertical machine #1 1-Mill as per folio FB090 & dwg D3901,
 FOLIO REV: AA
 DWG REV: E
 2-Deburr as required
B.A 12/11/03 8 0
 DAS 08 9-89

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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Approvals: Process Plan: Date: Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC2- Inspect parts off machine FAI/FAIB Memo ***EXTRA MATERIAL WILL BE CUT ON ASSEMBLY***	0.00 0.00		L.A 12/11/03		8	0		DAS 08 9-89
130 *130* QC Quality Control	QC8- Inspect parts - second check Memo ***EXTRA MATERIAL WILL BE CUT ON ASSEMBLY***	0.00 0.00		2-11-4		8	4		DAS 04 9-89
140 *140* Packaging Packaging	Identify as per dwg & Stock Location: <u>W/A</u> Memo	0.00 0.00				8	12/11/05		MAL

NCR: Yes / No

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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 91598

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Page 3

October-17-12 9:50:45 AM

Item ID: D3901-3

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Bar

Start Date: 10/17/12 Start Qty: 8.00 ***8***

Cust Item ID:

Required Date: 10/26/12 Req'd Qty: 8.00 ***8***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	QC21- Final Inspection - Work Order Release	0.00							
150									
QC	Memo	0.00							
Quality Control									

12/11/12

MLJ 12-11-05

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

October-17-12 9:50:45 AM

Page 1

Work Order ID: 91598

Parent Item: D3901-3

Parent Item Name: Bar

Start Date: 10/17/12

Required Date: 10/26/12

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP RevA: New issue DD verified by:EC
verified by:JLM

IPP RevB: Now on cnc JFS 12/02/13

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304B0.250x0.500 304 BAR .250 x .500		Purchased	No			100	f	217.5024	5.573	46.930526			

Location

Loc Qty

Loc Code

MAT050

217.5024

121216

133.88

122008

66.87

122981

0.065

123216

16.6874

M123535 x 49.3 12/11/12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

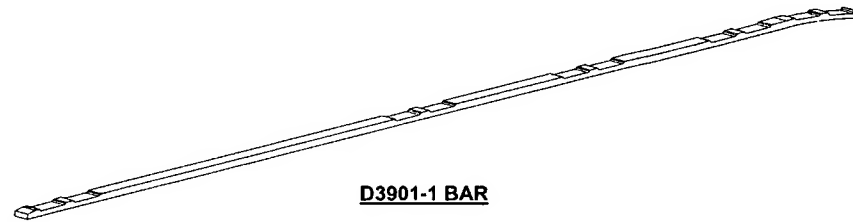
DQA: _____ Date: _____

QA Closed: _____ Date: _____

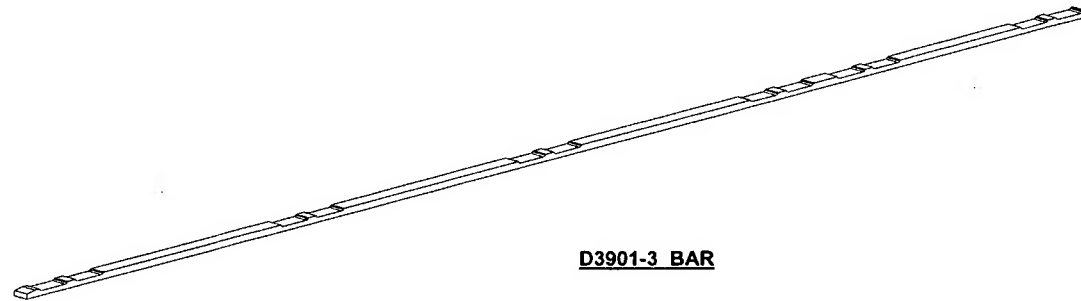
Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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8 7 6 5 4 3 2 1

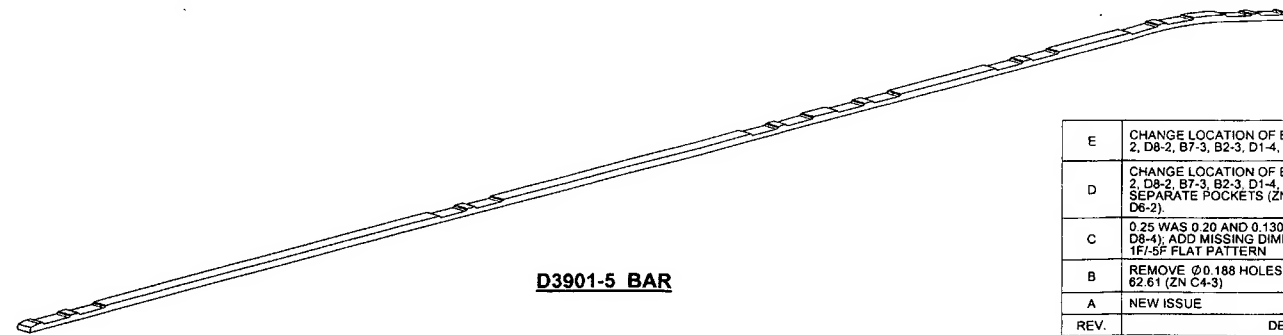
91598
PL 12-10-17



D3901-1 BAR



D3901-3 BAR



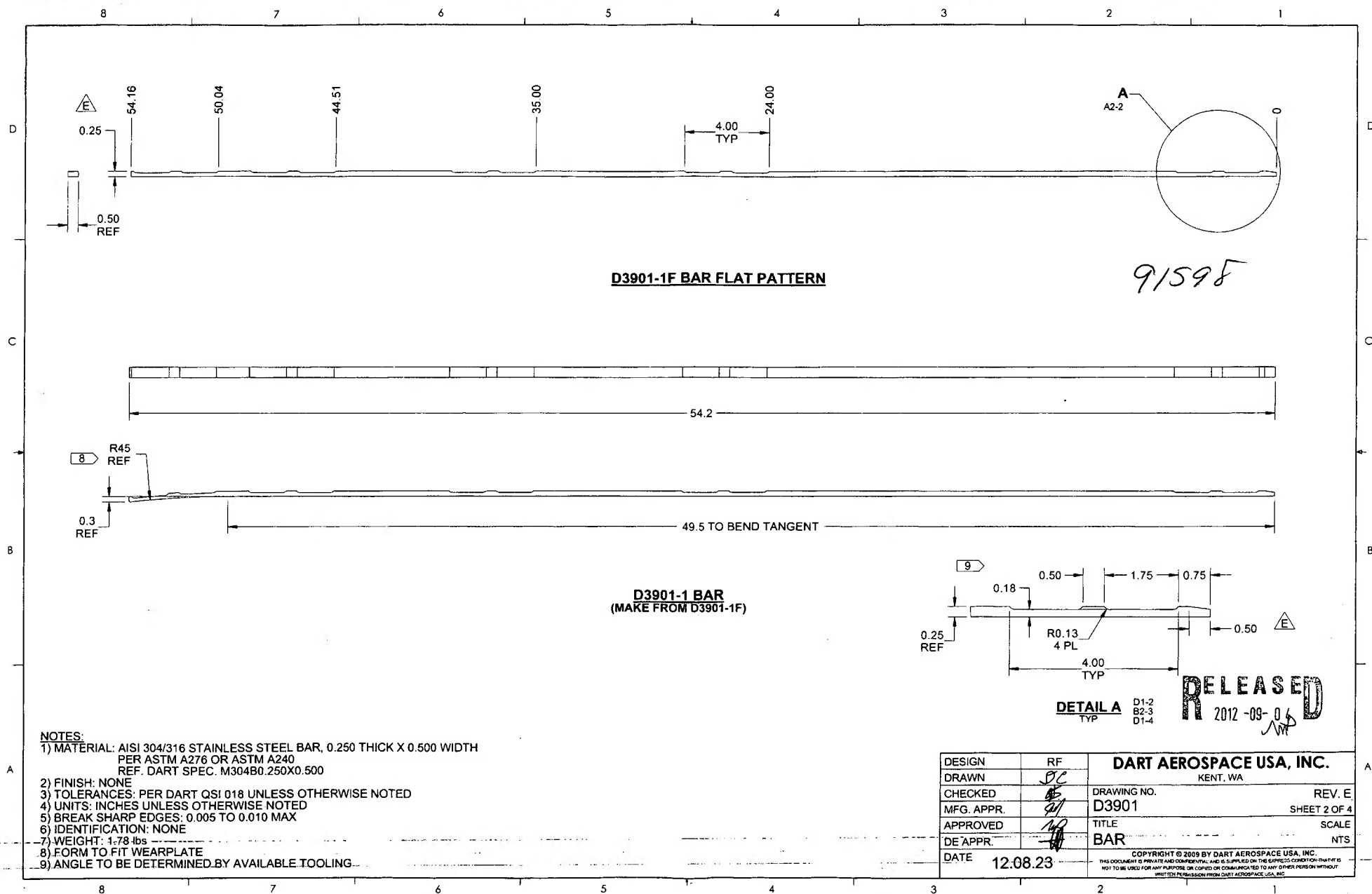
D3901-5 BAR

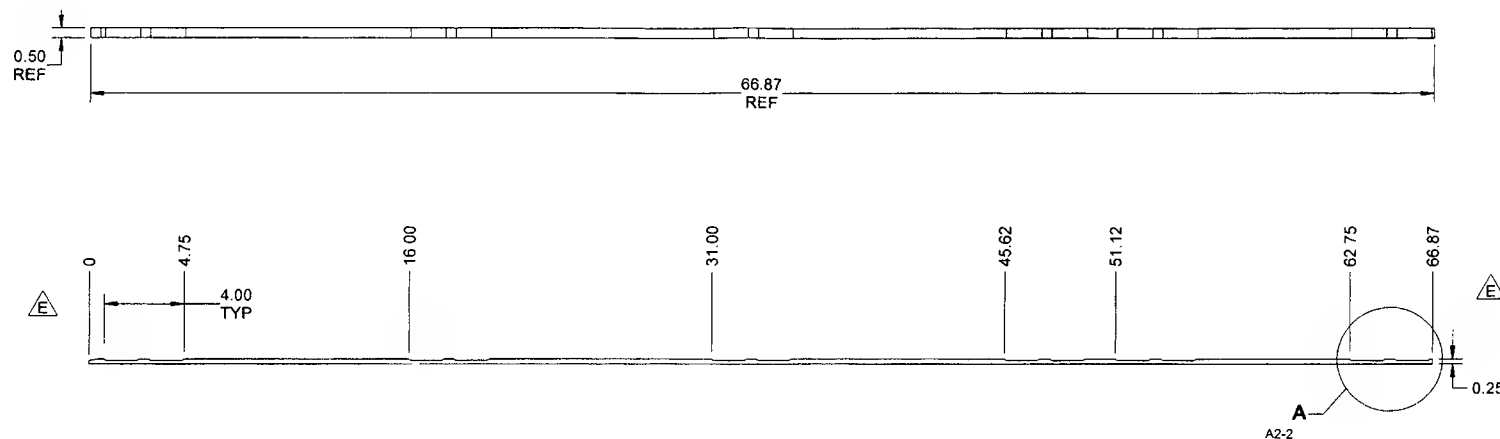
RELEASED
2012-09-04
MP

E	CHANGE LOCATION OF END POCKETS ON -1/3/5 (ZN B1-2, D8-2, B7-3, B2-3, D1-4, D7-4).	DC	12.08.23
D	CHANGE LOCATION OF END POCKETS ON -1/3/5 (ZN D1-2, D8-2, B7-3, B2-3, D1-4, D8-4). SPLIT POCKETS INTO TWO SEPARATE POCKETS (ZN A2-2). ADD POCKET TO -1 (ZN D6-2).	DC	12.08.21
C	0.25 WAS 0.20 AND 0.130 WAS 0.080 (ZN B2-2, B1-2, B1-3, D8-4). ADD MISSING DIMENSIONS (ZN C5-3); ADD D3901-1F/5F FLAT PATTERN	RF	12.01.24
B	REMOVE Ø0.188 HOLES FROM D3901-1/3/5. 62.12 WAS 62.61 (ZN C4-3)	RF	09.06.30
A	NEW ISSUE	RF	09.03.30
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE USA, INC. KENT, WA DRAWING NO. D3901 TITLE BAR SCALE NTS	
DRAWN	DC		
CHECKED	RF		
MFG. APPR.	RF		
APPROVED	RF		
DE APPR.	RF	REV. E SHEET 1 OF 4 DATE 12.08.23	
DATE	12.08.23		

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8 7 6 5 4 3 2 1





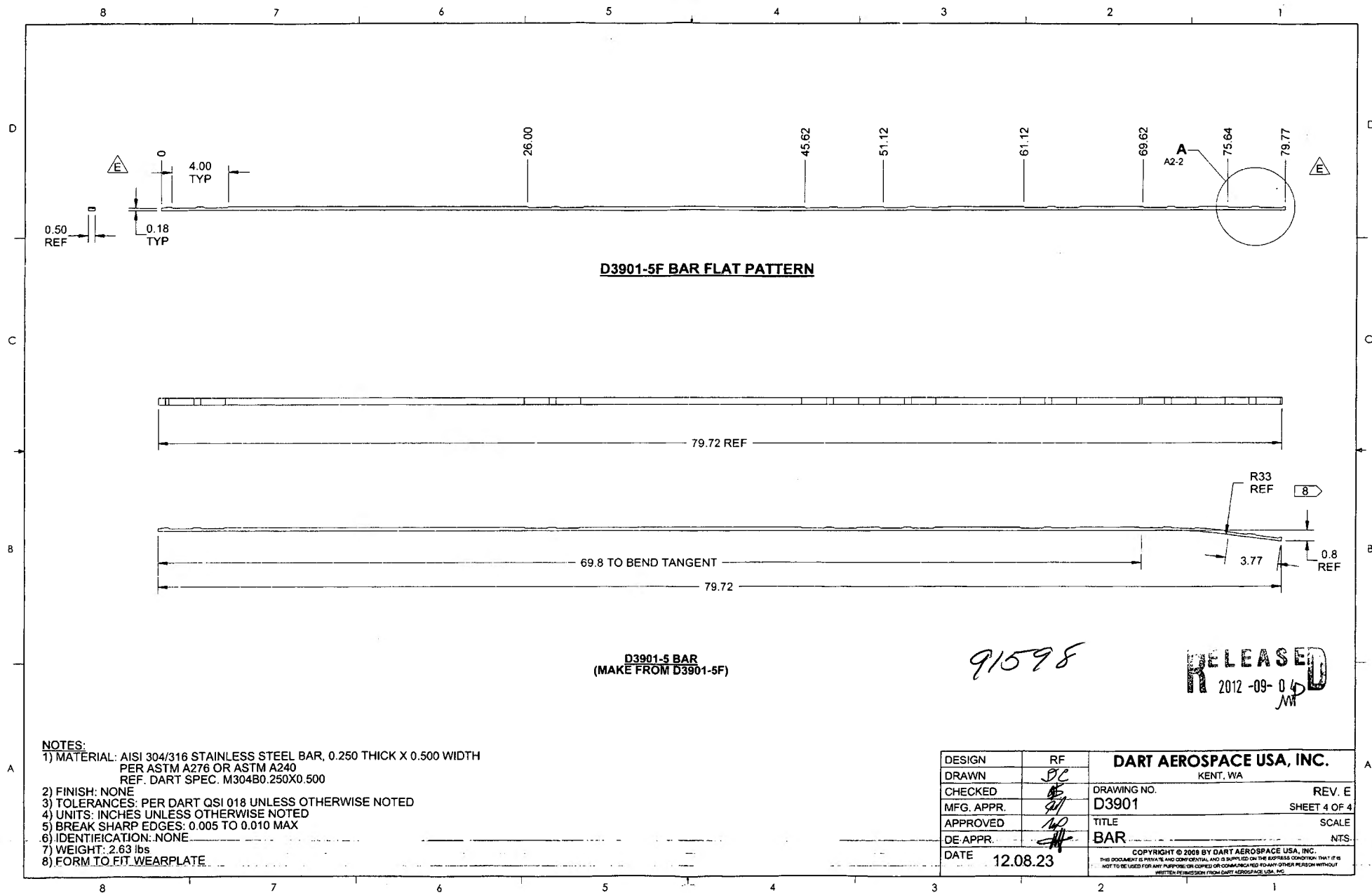
D3901-3 BAR

NOTES:

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL BAR, 0.250 THICK X 0.500 WIDTH
PER ASTM A276 OR ASTM A240
REF. DART SPEC. M304B0.250X0.500
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 2.21 lbs.

DESIGN	RF	DART AEROSPACE USA, INC.	
DRAWN	DC	KENT, WA	
CHECKED	BE	DRAWING NO.	REV. E
MFG. APPR.	ST	D3901	SHEET 3 OF 4
APPROVED	MA	TITLE	SCALE
DE APPR.	MA	BAR	NTS
DATE	12.08.23	<small>COPYRIGHT © 2009 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.</small>	

RELEASED
2012-09-04
JP



FIRST ARTICLE INSPECTION CHECKLIST

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

